



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

05/15/95

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NYR000004689

FACILITY NAME -> CHEMICAL WASTE MGMT INC - GAESS

MAILING ADDRESS -> 580 EDGEWATER DR
WAKEFIELD, MA 01880

INSTALLATION ADDRESS -> OFF MEADOW RD ON CONRAIL S OF
MH #1 & VLG OF HARRIMAN 200 FT
HARRIMAN, NY 10926

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
290 BROADWAY
NEW YORK, NEW YORK 10007-1866

ATTN: AIR & WASTE MANAGEMENT DIVISION, 22ND FL.
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: MOREIRA, DAVID
PROJECT MGR
CHEMICAL WASTE MGMT INC - GAESS
580 EDGEWATER DR
WAKEFIELD, MA 01880

**Waste Management, Inc.**

A WMX Technologies Company Phone 617.246.4210
580 Edgewater Drive
Wakefield, MA 01880-6292

May 9, 1995

Mr. Jack Hoyt
EPA Region 2
2nd Floor
290 Broadway
New York City, New York 10007-1866

RE: Notification of Regulated Waste Activity

Dear Mr. Hoyt:

Attached please find a completed US EPA Form #8700-12 *Notification Of Regulated Waste Activity* necessary for obtaining a "Generator USEPA ID Number" for the transportation and disposal of drill cutting spoils. As identified within the attached form, there are three (3) 55 gallon drums of soil cuttings and one (1) 55 gallon drum of decontamination water that was generated at the Gaess Environmental Site, in Harriman, New York. The transportation of this material will be a "one-time" event.

We trust that the enclosed information is suitable for obtaining the ID number. If you should have any questions regarding any of the enclosed information, please contact me at (617) 246-4210.

Sincerely,

David Moreira
Project Manager

Attachments

ALL SECTIONS MUST BE COMPLETED

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

U.S. EPA (JedEx)
Form Approved. OMB No. 2050-0028. Expires 6-31-93
GSA No. 0246-EPA-OT

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



EPA

Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

U.S. & SOLID WASTE
PROGRAMS BRANCH

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☒

A. First Notification

☐

B. Subsequent Notification
(complete item C)

C. Installation's EPA ID Number

NYR000004089

II. Name of Installation (Include company and specific site name)

C H E M I C A L W A S T E M G M T I N C - G A E S S

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street MUST HAVE BUILDING NUMBER OR ADDITIONAL DESCRIPTION

O F F M E A D O W R D O N C O N R A I L S O U T H

Street (continued)

O F M H # 1 A N D V I L L A G E O F H A R R I M A N A P P R O X 2 0 0 F T

City or Town

H A R R I M A N

State

ZIP Code

NY

1 0 9 2 6 -

County Code

County Name

0 7 1

C R A N G E

IV. Installation Mailing Address (See instructions)

Street or P.O. Box

5 8 0 E D G E W A T E R D R I V E

City or Town

W A K E F I E L D

State

ZIP Code

MA

0 1 8 8 0 -

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

M O R E I R A

(first)

D A V I D

Job Title

P R O J E C T M A N A G E R

Phone Number (area code and number)

6 1 7 - 2 4 6 - 4 2 1 0

VI. Installation Contact Address (See instructions)

A. Contact Address
Location Mailing

☐☒

B. Street or P.O. Box

5 8 0 E D G E W A T E R D R I V E

City or Town

W A K E F I E L D

State

ZIP Code

MA

0 1 8 8 0 -

VII. Ownership (See instructions)

A. Name of Installation's Legal Owner

(LANDLORD) (PROPERTY OWNER)

C O N R A I L

Street, P.O. Box, or Route Number

S I X P E N N C E N T E R

City or Town

P H I L A D E L P H I A

State

ZIP Code

PA

1 9 1 0 3 -

Phone Number (area code and number)

2 1 5 - 2 0 9 - 1 6 9 4

B. Land Type

P

C. Owner Type

P

D. Change of Owner Indicator

Yes

No

X

(Date Changed)
Month Day Year

FROM: JACOB HOYT, EPA REGION 2, 290 BROADWAY
NYC NY 10007-1866 22ND FLOOR

spoke to David Moreira 5/12/95 330

call

ID - For Official Use Only									

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity

1. Generator (See instructions)

- ☐ a. Greater than 1000kg/mo (2,200 lbs.)
☐ b. 100 to 1000 kg/mo (220 - 2,200 lbs.)
☒ c. Less than 100 kg/mo (220 lbs.)

2. Transporter (Indicate Mode in boxes 1-5 below)

- ☐ a. For own waste only
☐ b. For commercial purposes

Mode of Transportation

- ☐ 1. Air
☐ 2. Rail
☐ 3. Highway
☐ 4. Water
☐ 5. Other - specify

3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions.

4. Hazardous Waste Fuel

- ☐ a. Generator Marketing to Burner
☐ b. Other Marketers
☐ c. Boiler and/or Industrial Furnace

- ☐ 1. Smelter/Refinery
☐ 2. Small Quantity Exemption

Indicate Type of Combustion Device(s)

- ☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace

- ☐ 5. Underground Injection Control

B. Used Oil Fuel Activities

1. Off-Specification Used Oil Fuel

- ☐ a. Generator Marketing to Burner
☐ b. Other Marketer
☐ c. Burner - Indicate device(s) - Type of Combustion Device

- ☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace

- ☐ 2. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☐ 2. Corrosive (D002) ☐ 3. Reactive (D003) ☐ 4. Toxicity Characteristic (D000) ☐

(List specific EPA hazardous waste numbers for the Toxicity characteristic container(s))

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
U 2 1 0	U 2 2 8				
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number. See instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature ORIGINAL OF
GENERATOR BLUE INK

Name and Official Title (type or print)

David Moreira-Proj. Mgr.

Date Signed

XI. Comments

Material generated by drill cuttings from soil borings.

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)